UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND						
1 Date of Request: 8-3-05 2 Serial/Patent # 10/628,097						
3 Please refund the following fee(s):		4 PAP NUM		5 DATE FILED	6 AMOUNT	
	Filing				\$	
	Amendment				\$	
X	Extension of Time			5-6-05	\$ 60.	
	Notice of Appeal/Appeal				\$	
	Petition				\$	
	Issue				\$	
	Cert of Correction/Terminal Disc.				\$	
	Maintenance				\$	
	Assignment			·	\$	
	0ther				\$	
			7 TOTAL AMOUNT S 60.			
		8 TO	8 TO BE REFUNDED BY:			
10 REASON:			Treasury Check			
X	Overpayment	X	C	redit Dep	osit A/C #:	
	Duplicate Payment		9 4	500	5 45	
	No Fee Due (Explanation):					
EOT outside six-month statutory period.						
11 REFUND REQUESTED BY:						
TYPED/PRINTED NAME: Re Ha Williams TITLE: Paralegal						
SIGNATURE: Retta Williams PHONE: 2-3229						
office: Petitions,						
THIS SPACE RESERVED FOR FINANCE USE ONLY: APPROVED:						

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B